## PART B - FEE(S) TRANSMITTAL

together with applicable fee(s), to: Mail Complete and send this form

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**FILING DATE** 

02/19/2002

7590

07/01/2004

James V. Costigan, Esq. HEDMAN & COSTIGAN, P.C. **Suite 2003** 1185 Avenue of the Americas New York, NY 10036-2646

APPLICATION NO.

10/079,100

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James (V.	James V. Costigan		
	16	(Signature)	
September	er (7,)2004	(Date)	
FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	

5617

1011-378

TITLE OF INVENTION: IRONING DEVICE FOR APPLICATION TO MACHINES FOR BLOWING-IRONING TROUSERS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$665	\$300	\$965	10/01/2004	
EXA	MINER	ART UNIT	CLASS-SUBCLASS	]		
SMITH,	JAMES G	3765	223-057000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		on form	For printing on the patent front page ames of up to 3 registered patent gents OR, alternatively, (2) the name rm (having as a member a registered gent) and the names of up to 2 registromeys or agents. If no name is listerial be printed.	attorneys or 1 Hectmar of a single l attorney or 2 stered patent	n & Costigan, P.	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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Please check the appropriate assignee category or categories (w  4a. The following fee(s) are enclosed:  R Issue Fee Publication Fee Advance Order - # of Copies  2	ill not be printed on the patent);  4b. Payment of Fce(s):  A check in the amo  Payment by credit of  The Director is he Deposit Account Num	card. Form PTO-2	s enclosed.  038 is attache		<u> </u>	
(	(Date)  ember 7, 2004  Il not be accepted from anyone the assignee or other party in darademark Office.  The information is required to d by the USPTO to process) an 137 CFR 1.14. This collection is g, preparing, and submitting the depending upon the individual to complete this form and/or Chief Information Officer, U.S. mmerce, Alexandria, Virginia FORMS TO THIS ADDRESS. 2313-1450.		04 WASFAW2 01 04	00000037 6.00 DA		0079100 O OP